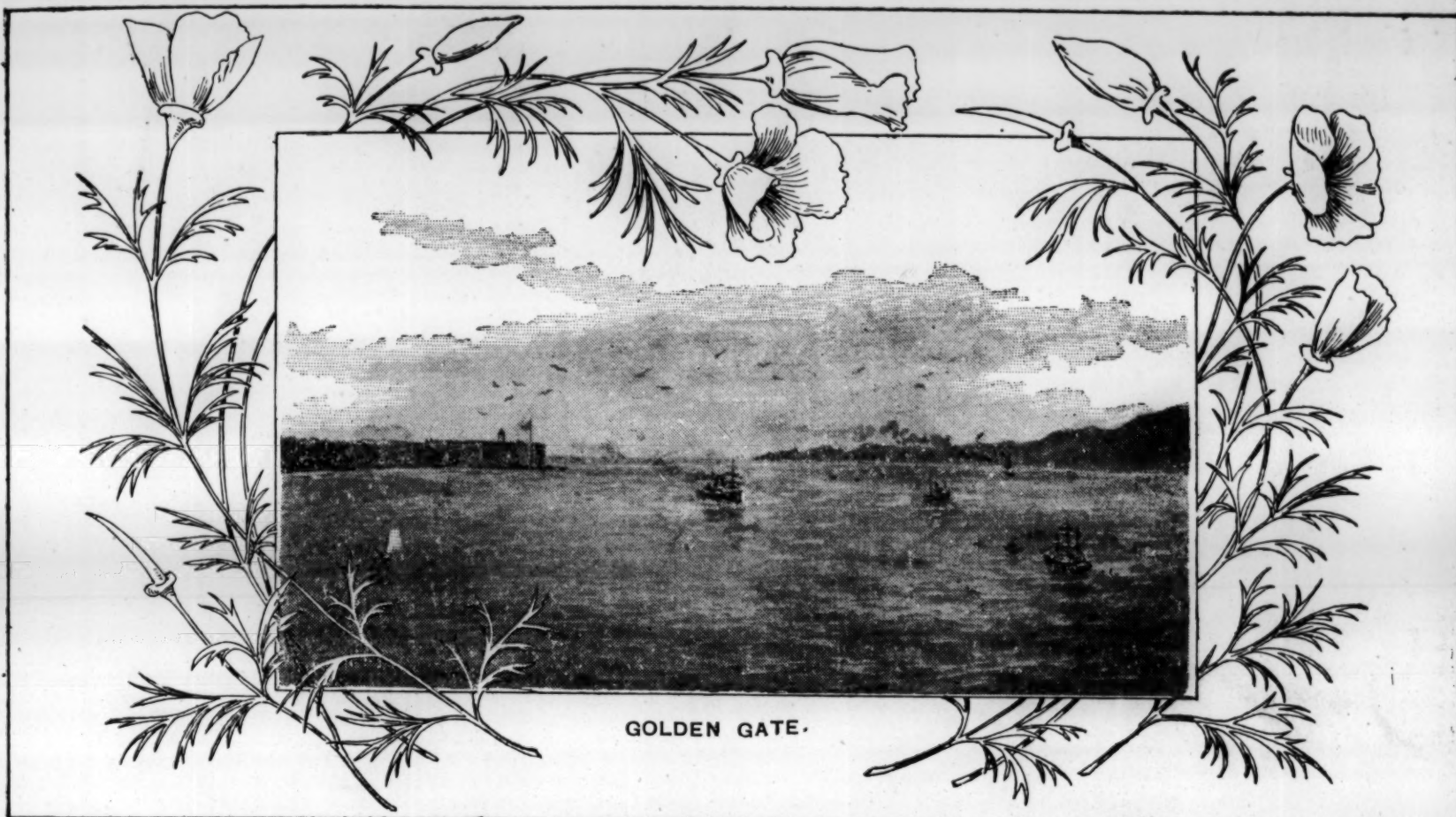


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NO. 6



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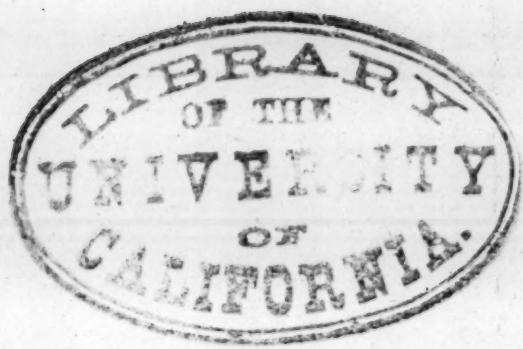
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The Late H. B. Piper, M. D.
Biographical Sketch. Page 221.



California Medical Journal.

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San Francisco, California, June, 1896

NO 6

Ranch Life and Adventures in Arizona.

J. A. MUNK, M. D., Los Angeles, Cal.

Arizona is one of the few remaining Territories that are yet to be made states, and is also one of the few sections of our broad domain where the range cattle industry is conducted on a large scale. The natural conditions of the country are exceptionally favorable for growing cattle, and a portion of it, at least, will doubtless always be reserved and devoted to that purpose. As a breeding ground it is unsurpassed, but for maturing beef steers the northern range is perhaps, preferable. Thousands of young steers are sent out annually from Arizona to stock the ranges of Wyoming, Montana and other feeding states. The steers thus furnished are of excellent quality being the progeny of thoroughbred Hereford and Durham bulls crossed with native and grade cows. A dash of native blood in ranch cattle is desirable as it gives them the rustling ability for finding adequate subsistence in seasons of drought and scant forage. Here in California we speak of any small farm of a few acres as a ranch,

which is a misnomer, for the word as originally used applied to the large cattle ranches of the open range, which cover miles of country.

Ranch life is somewhat wild and lonely but thoroughly natural, and is as free and independent to the rancher as it is to his unfettered cattle which roam at will over a thousand hills. As a place of permanent residence for a family of women and children it is not desirable, because of its isolation and the lack of social and educational privileges; but for men who can "rough it" it has a rare fascination. The average ranch house is not designed for luxurious living but is outfitted only to serve best the business in hand—that of raising cattle. The majority of ranches are "stag camps" composed entirely of men who occupy a rude cabin near a spring or stream of water, where they live after a fashion and keep house in ranch style. Every man has his particular work to do, but unless it is on some large ranch where the force of men

employed is sufficient to require the services of a *chef* every man on the place lends a hand in helping to do the housework. It is an unwritten law of the ranch that everybody shall share in this work, and if anyone shirks his duty he must either promptly mend his way or leave. It is seldom, however that the rule has to be enforced, for the necessities of the case require that every man shall be able to prepare a meal, as frequently he is left alone for days or even weeks together when he must either cook or starve.

The environments of ranch life are highly conducive to good health. The scenery is delightful, the air pure and bracing, the food wholesome and nutritious, the couch comfortable and sleep refreshing. Walking, riding and other light work furnish all the exercise that is needed. Indeed, nothing is better than horseback riding for stimulating sluggish organs, or to excite to healthy action all the bodily functions. It stirs the liver, causes deep breathing, strengthens the heart's action, tones the nerves and makes an appetite that waits on good digestion. Such an outdoor life is often better than medicine, and the true panacea for most of the ills that human flesh is heir to.

Horseback riding is the principal means of locomotion on a ranch. Walking is too slow and tiresome, and wheeled conveyance is inconvenient or impossible for cross country driving. Everything goes by horseback, which will carry you where ever you want to go. The cowboy takes a pardonable pride in his calling, and can boast of

not a few accomplishments. When he mounts his bronco and starts off on his rounds he has a clear field that covers a wide scope of country. The ride is inspiring and it is no wonder that he feels as if he owned the earth which he practically does, for his nearest neighbor lives ten miles away, and the road in every direction leads clear to the horizon.

The equipment of the cowboy is his horse and riata. These are his constant companions and serve every purpose. His work includes much hard riding which he enjoys if no accident befalls him; but, dashing along at headlong speed he is liable to mishaps, for although his horse be sure footed he may step into a prairie dog hole or stumble on a rock which is apt to bring both horse and rider to the ground. He is indeed, fortunate if in his fall he escapes unhurt, or only receives a fractured bone and not a broken neck, for such a tumble often results seriously if not fatally.

Managing cattle successfully is an art that can only be achieved by long practice. It is really surprising how expert cowboys become in handling a herd. Nearly all the work done among cattle is on horseback which includes herding, driving, cutting out and roping. A horse learns to understand the business about as well as his rider, and a trained cow-pony is as essential at a "round up" as is the skillful cowboy. The two form a combination that is invincible in a herd of wild cattle. The cow or steer that is selected to be "cut out" seldom escapes. While running at the horse's greatest speed





Dave.



Roping a Calf.

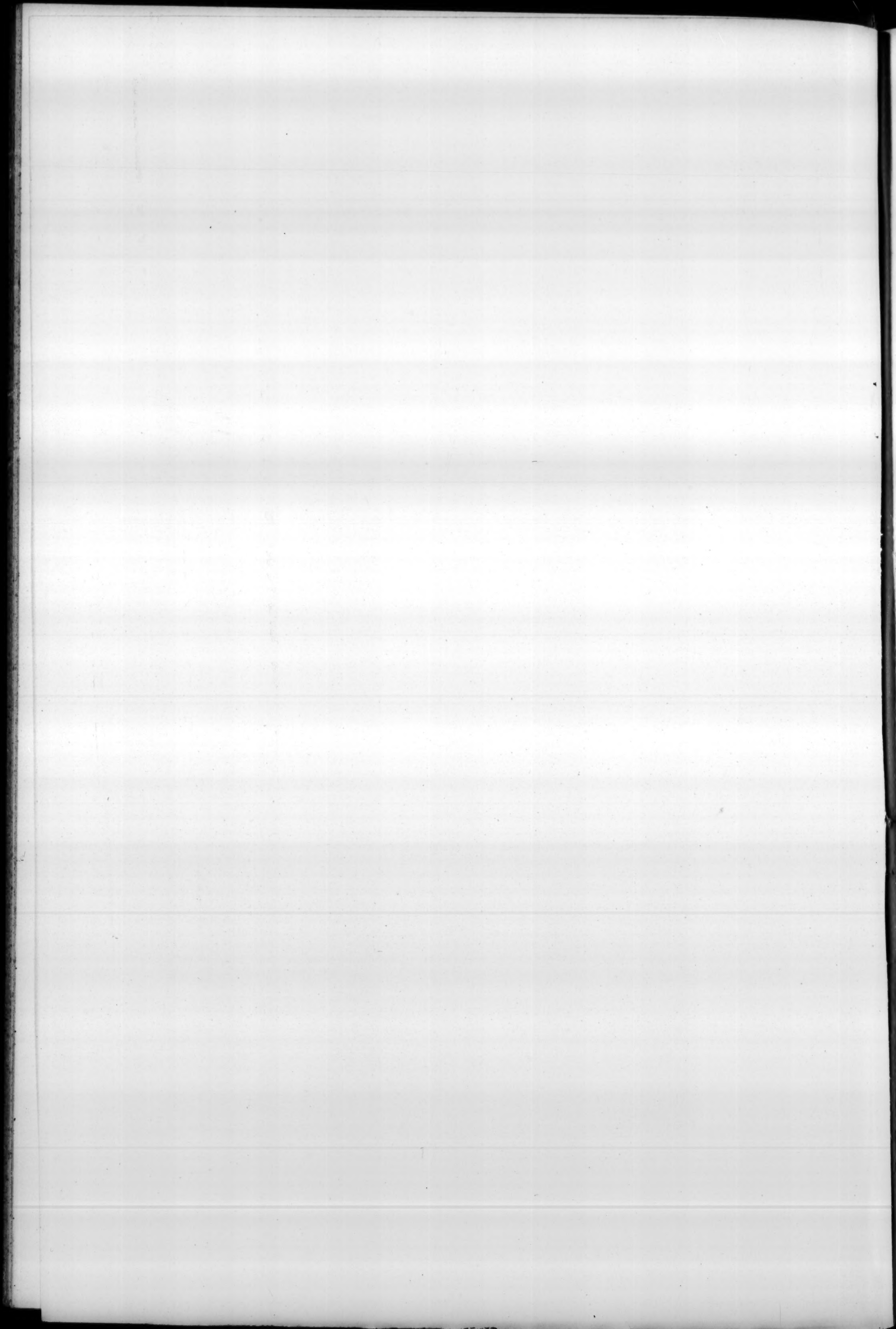


Pinaleno Ranch, Willcox, Arizona.



Cattle Corral--Pinaleno Ranch





the rider whirls the riata over his head until at a favorable moment it leaves his hand and uncoils as it flies ahead at lightening speed, when, if the throw is successful, the noose drops over the animal's head, the horse suddenly stops and braces himself, the riata tightens and the animal being brought to an abrupt halt, falls to the ground as if shot. In an instant the cowboy is out of his saddle, while the horse stands and pulls steadily on the rope which is firmly fastened by a few skillful turns to the horn of the saddle. The man grasps the animal by the tail or a hind leg, turns it on its side and ties its four feet together, when it is helpless and ready for branding, inspection or whatever else is required. In some of the roping contests gotten up by the cowboys as a test of their skill, the steer has been caught and tied down in less than a minute.

A cowboy's life is full of stirring incidents and adventures. In his trips about the country looking after cattle, hunting game or being hunted by wild Indians, there occurs plenty of novelty and excitement to break any fancied monotony belonging to ranch life. In my annual visits to the ranch during the past dozen years, I have had an opportunity to observe ranch life, and realize some of the experiences of a cowboy.

One day in the summer of 1890, Dave our foreman, Ted another cowboy and myself made a trip into East Canyon in the Dos Cabezas mountains to brand some large calves that had been seen in that vicinity. We had ridden leisurely along for some distance and

passed several bands of cattle without seeing any thing to brand. As we rounded a bend Dave spied some cattle several hundred yards up a side canyon resting in the shade of a grove of live oak trees. Instantly he spurred his horse into a run after them, and shouted back that he saw two mavericks. Owing to the broken character of the country it was hard to keep each other in sight, but Ted followed after as best he could while I brought up the rear. It was a bad piece of ground to cover and in trying to get through I urged my horse up a rocky slope where I thought I saw traces of a trail, only to find myself on the brink of an impassable precipice. I turned back and took another path and after beating about for some minutes in a labyrinth of difficulties I finally emerged into an open space. But as quick as the cattle were to escape, for on the ranch they are alert and wild, and as slow as I was in getting through, Dave had already caught and tied both calves and was starting a fire to heat the branding irons. It seemed like the work of magic, and was altogether incomprehensible to a tenderfoot. Ted like myself "got lost in the shuffle" and was too late to be of any assistance. It was a clear case of "knowing how to do it" and of one man thoroughly understanding his business. Dave explained that success in such an emergency depended on making a quick, bold dash and heading the cattle up the mountain, which so surprised and confused them that before they had time to collect their scattered senses, so to speak and scamper off,



the work was done.

Another adventure which was not so fortunate occurred in the fall of 1885. My brother "Bill" and I were out one day riding the range, and incidentally watching for any game that might chance to cross our path. We rode over seemingly limitless natural meadows of as fine gramma grass as ever grew, and enjoyed the pleasant sight of seeing cattle feeding on plenty and enjoying perfect contentment. Game was abundant but shy and as we were not specially hunting that kind of stock forbore giving chase or firing at long range. While we were poking about among the hills some distance back of the Pinaleno ranch and headed for home, we separated to explore parallel ravines in search of some stock that we wished to drive in. I had not gone far before I found the cattle that were already on the trail going to the spring for water. In looking about while jogging along I caught sight of a deer under a mesquite tree which grew on the brow of a distant hill. I was in plain sight of the deer which was lying down either asleep, as it gave no heed to my movements, or, being accustomed to the sight of horses and cattle, for both deer and antelope often mix and feed familiarly with stock on the open range, it was at that distance unable to distinguish between friend and foe, and did not change its position as I rode by and out of view behind the hill, where I dismounted and stalked the quarry on foot. I crept cautiously up the hill until I caught a glimpse of its horns when I

rose up and put a bullet from my Winchester rifle through its head which rolled it over dead. The deer was in prime condition and furnished the camp with a fine lot of excellent venison.

The shot and my lusty hello soon brought "Bill" on the scene and together we lifted the deer upon the horse, when just as we had it in position to tie to the saddle, the bronco unexpectedly gave a vicious kick that struck me on the knees and knocked me down. Fortunately the blow was a glancing one and an examination showed that no bones were broken. What made him kick was a mystery as he was considered gentle and had carried deer on other occasions; but a bronco like a mule is never altogether safe particularly in his heels. After some delay in getting started and in a somewhat demoralized condition we mounted and rode to the ranch house. That night I had a severe chill which was followed by a high fever with much pain and swelling in the left knee, and was confined to the house for several days. After a week's illness I was able to travel and return home, but not until after a siege of several months of medication and bandaging was my knee restored to its normal condition.

It takes one hundred years to make a century hence the first century was not completed until the close of the year 100. The nineteenth century will not be completed until December 31, 1900, and the twentieth century will not dawn until January 1, 1901. *California Christian Advocate.*

Hypnotic Anæsthesia,—A Case in Practice.

CHAS. CLARK, M. D., San Francisco.

Thinking that those readers of the Journal, who had the hardihood to worry through a somewhat lengthy article on hypnotism in general which appeared in the March issue, might be interested in learning something of its practical workings, I have yielded to the temptation to "scribble."

This article will be in the nature of a report on a trachelorrhaphy and curettage of uterine cavity done under hypnotic anesthesia together with a few remarks on the same.

The patient a young married lady, twenty— years of age, mother of two children, eldest three years, youngest eighteen months old, had been suffering from chronic metritis dependent on a laceration of the cervix uteri, and from the long train of nervous symptoms associated with this condition, for the last five or six months.

Operation for the repair of the lacerations, and curettage were suggested and accepted.

After a month's preparatory treatment with tampons saturated with ichthyol and boroglyceride, patient submitted to operation on April twenty-second, last.

Will not describe the operation in detail as it differed in no way from the method ordinarily followed. Denuding the flaps. Dissecting out the cicatricial tissue and suturing. Silver

wire was the material used for sutures.

The patient objected to taking chloroform as it had always nauseated her and having been hypnotized before it was suggested that she have the operation done under hypnotic anæsthesia, to which she readily assented.

Anticipating that it would be difficult to hypnotize her while mentally disturbed by the thoughts of an operation, she was placed under hypnosis several times during the week preceeding the operation, and suggestions calculated to calm her at that time made to her.

The evening before, and on the morning of the operation, she was again hypnotized and told that she would have no difficulty in going to sleep when the time came for operation.

When everything had been prepared she was requested to lie down in another room from that prepared as an operating room, and was then hypnotized by a combination of Braid's method and the suggestive method of Liebault.

A small yale lock key being used as the object to fix the gaze upon and suggestions calculated to cause drowsiness made.

The patient rose at a command and walked into the operating room though she showed a desire to turn about and

walk out. She was then lifted on to the table and allowed to sink into deep sleep when she was placed in the lithotomy position and the limbs fixed in position by suggestion.

It was now suggested that she should feel no pain, that the parts concerned in the operation should be relaxed and insensible and that she should not see anything or hear anything except that said by the operator. We shall see later how these suggestions were realized.

The patient submitted to a thorough examination by myself and two assistants. The parts were as thoroughly relaxed as in chloroform narcosis, permitting examination of all the pelvic organs.

During dilatation of the cervical canal with Goodale's dilators, patient was somewhat restless and requested that we desist, so an Esmarch mask was placed over her face and a few drops of chloroform dropped on. Chloroform! Now readers don't throw up your hands and say "I told you so." Just enough chloroform was used to carry out the suggestion that she was being chloroformed after which plain water was used on the mask with just the same effect as chloroform.

The amount estimated to have been used, was thirty drops, which would not have been sufficient for such a lengthy operation. Personally, I believe the estimate to be twice the quantity actually used.

After the operation was completed having consumed about an hour's time, the patient was told to make herself rigid, which she did, and was carried

to her bed and woke up promptly on being told to do so.

At first she could not recall what had happened but after some questioning she remembered the greater part. She said that at no time had she any pain. While she was being operated upon however she acted much as one in the later stages of chloroform narcosis. She exhibited reflexes and talked continuously. Said that she knew what was taking place about her all the time, could hear the operator and judged from his conversation what was being said by the others. Occasionally heard the other's voices also.

She knew when she was given the water for chloroform but experienced the same sensations as if it were chloroform. She described her sensations, when cut with the scissors or scalpel, as a gritty sensation, devoid of pain, but as though she were cutting some gritty substance with scissors.

Placing the stitches did not hurt but gave rise to a sense of tension. Felt just the same as when she was sewing a fowl when dressing it. From her description, the writer concludes that she experienced the same sensations as those experienced by a party under cocaine anæsthesia.

In conclusion will remark that it will probably not be possible to substitute hypnosis for chloroform in every case, but that where an operation is contemplated that if hypnosis be introduced and suitable suggestions made on several occasions previous to the time for operation, I can see no reason why one should not ordinarily be successful.

Will admit that in the case just cited everything was favorable in that the subject was very susceptible and desirous of avoiding the necessity of taking chloroform.

I sincerely hope this successful case may give courage to others to avail themselves of this pleasant means of inducing anæsthesia. Was assisted by Drs. W. A. Harvey and Vary.

Whooping Cough Accompanied by a Rare Form of Bronchitis.

G. P. BISSELL, M. D., Cedarville, Cal.

At the present time we, in this north-eastern part of the state are afflicted with whooping-cough among children, and a rare form of bronchitis among children and adults. The whooping-cough has prevailed for some months—ever since last fall. The bronchial affection did not distinctly declare itself until within about two months.

The latter if severe is ushered in with a chill and aching of some part of the body or of the whole body. Notably, the head and back are complained of.

At the onset the disease may well be mistaken for a severe cold, and if seen early its force may be easily broken, but a persistent cough remains. But if neglected, it is quite apt to run into pneumonia which is persistent, and very dangerous to life.

Following the usual course of pneumonia the lower lobe of the right lung is occluded. The first symptom that the disease has invaded the lung substance, or rather, I ought to say, is about to invade, is expectoration of clear red blood in small masses, not

coagulated. Of course the fact that the disease does not readily yield to remedies will point the mind to expectation of this invasion. Not until the disease begins to yield is there rusty sputa.

What name shall we give this disease? Some of the doctors in this region call it Catarrhal fever. It is as good a name as any. I call it Bronchial pulmonitis.

What causes it? It has a specific origin and is as infectious as whooping-cough. No one who has kept himself isolated has taken it. But unfortunately we have been afflicted with the evils of a religious excitement, and the people having congregated much together, the germs have invaded most of the community; and not the germ only, but the disease has developed in such force as to result in death in some instances.

Now what was its remote origin? Doubtless the whooping-cough. This epidemic is the third time that I have seen a disease with identical symptoms follow in the footsteps of whooping cough. But I have never seen this fact mentioned in medical literature.



Cerebral Localization and Surgery.

H. L. HENDERSON, M. D., La Grande, Oregon.

When one takes up an ordinary text book and reads the article on the subject of cerebral localization, he is impressed with the idea that we have at least one department of surgery that is as exact as a mathematical problem. The tyro is anxious to meet with a case of cerebral lesion in order that he may demonstrate his superior knowledge. When the expected case is finally presented, he is filled with dismay at finding that what he has studied and looked up to as the personification of medical accuracy is far from complete, and only serves as a hint of the road that he must patiently follow. I might digress at this point sufficiently to say, that in my humble opinion there are but very few medical books that were written by men who were practical physicians in the full sense of the term. Cerebral localization is of vast importance, and I would not be understood as belittling it, but I do wish to impress upon all those who are inexperienced in cerebral surgery that it is as yet far from perfect. It is very exact in all traumatic cases, but in those cases in which the surgeon is called upon for the relief of any condition arising from a tumor, cyst, degeneration, etc., he is forced to fall back on "common sense," coupled with an accurate knowledge of the anatomy of the cranial contents, together with an

equally accurate knowledge of the functions of the various parts. All the cases of this character are necessarily obscure, and require close discrimination in order to reach a correct diagnosis and subsequent surgical procedure that will end creditably. I am led to make these remarks in consequence of a case that recently presented in my practice, which I will now relate, as an excuse for presenting this paper.

The case that I hope will be of interest to some of the readers of the Journal is as follows: Mrs. W., aged about thirty years at the beginning of the trouble to be described, of the lympho-sanguine temperament, good family history as far as any diathesis is concerned, and the mother of three healthy children. About two and one-half years ago she began to suffer more pain than usually falls to the lot of the daughters of Eve, in the way of a violent headache and dizziness. The headache was of an intermittent type and the dizziness was most marked when she attempted to lay upon the right side. Her attending physician thought that it was a case of "biliousness" and prescribed accordingly. Finally another doctor was called in and he at once found that the cause of the suffering was some form of uterine disease which must be treated. After a long course

of douches, tampons, curettings, etc., another physician was called and he found the cause of the trouble to be situated in the rectum and treated accordingly. After this attendant had failed to give relief, the husband concluded that he would send her to one of our large cities and place her in a private hospital, in order that she might be under the treatment of the best physicians that our country affords. While in the hospital the patient observed that she was losing the sight of her right eye. As near as I can judge from her description of the case I am inclined to believe that her loss of sight was in the form of a right hemianopsia. The physician in charge of her case at this time held out but little hope of recovery, and despairing of getting relief in the city the patient and husband concluded that she had best come home and prepare for apparently the inevitable fatal issue. The city physician prescribed for her for some time after she returned home. I was called to take charge of the case about the middle of last October. I found the patient suffering great pain, extending from the glabella to the vertebra-prominens, total loss of vision in the right eye and nearly so in the left, being only able to distinguish light with the left eye; patient confined to bed by the orders of her previous physician. She was fairly well nourished, as her appetite was fair in spite of the narcotizing remedies that had been given her for a long period. All the reflexes appeared to be slightly exaggerated. She complained of an occasional snapping

sound in her right ear. I applied the ophthalmoscope and found an intensely "choked disk." Let me at this juncture impress upon the minds of all the great importance of the use of the ophthalmoscope in all suspected brain lesions. The intelligent use of this instrument will do more to clear away obscurity than any other means with which I am acquainted. In the present case it gave me the basis of the diagnosis of the cerebral condition, which subsequent surgical means corroborated. I at once informed the patient and family of my belief that there existed an intracranial growth of some character. I advised that an attempt be made to produce an absorption of the growth by the use of alterative medicines, as well as to allow sufficient time to thoroughly study the case. I found on looking over the surgical works at my command that they all mentioned symptoms as diagnostic in their importance that were not to be found in this case. There existed no parietic symptoms. There were no spasmodic contractions. The mind was as clear as it had ever been in the whole life of the patient. There was no interference with trophic activity in any part of the body. I watched the case closely until the latter part of February, at which time I announced to the family that I had satisfied myself as to the locality of the growth, and that as the remedies that we had been using appeared to have had no appreciable effect on the growth; in fact, the intracranial pressure appeared to have increased. I therefore advised that an effort be

made to reach and remove the offending tumor. I believed it to be in the region of the right optic thalamus. As no relief could be expected from other sources, the family and patient readily consented to the effort being made. Accordingly, on the first day of last March, after due preparation, the patient was anesthetized, and after making the proper incision through the scalp and pericranium, I placed a trephine over the right parietal eminence and after making a double opening through the skull and cutting away the intervening bone, I opened the dura and thrust my finger into the cranial cavity. When the buttons of bone were removed the intracranial pressure was so great that the brain protruded beyond the level of the surface of the skull. Exploring with my finger I discovered that there was greater resistance in the forward and downward directions than in others. I set a small trocar and canula in such direction that it would reach the right optic thalamus and pushed it through the brain tissue. After the point had traversed about two inches of the brain tissue, it met with firm but elastic resistance. A firm pressure caused it to penetrate the resisting mass, when all resistance suddenly ceased. I then removed the trocar, when a little more than two fluid ounces of a honey-like fluid gushed out and the protruding brain receded to its normal position. I introduce a drainage tube made of a piece of asepticised rubber catheter pushing it to the bottom of the cavity. I then carefully closed the dura with catgut

sutures and the external wound with silk. It would no doubt be interesting to transcribe the record as kept by the trained nurse in attendance, but space forbids. Suffice it to say, that the recovery was uninterrupted. The temperature never passed 101° . The discharge from the drainage tube continued for about three weeks, when the tube was gradually pushed out by the closure of the wound from the bottom, and the discharge ceased.

At this time, May 5th, the patient is in the best of health. There is comparatively no pain in the head. The sight is gradually returning, and at this time the patient can distinguish light as it appears from a window. I feel confident that the vision will ultimately become fairly good. The patient and her family are very much gratified at the success of the operation. Her life is now at least bearable, even if she would never gain her sight, the suffering being relieved.

Since this case has been under treatment I noticed a report from a physician in Denver of a case similar in many respects to this one. There was no effort made to relieve the trouble, the patient died and a very interesting autopsy was reported. Also one of like character reported from London, which furnished a very interesting post mortem. An autopsy is very instructive, but it is not interesting to the patient. I will, perhaps, never know the exact location of the cyst, in the case mentioned above, but my patient is living and comfortable. From the standpoint of anatomy and physiology, I would say that the optic

thalamus was the center of action of the diseased mass; yet there are some features in the case that are somewhat doubtful. I will leave the exact location of the trouble to those who are capable of locating it by the laws of cerebral topography.

When cases of this nature present themselves, it is the plain duty of the physician to give the patient every

possible chance for his life and to relieve the suffering as much as possible and render life bearable. It requires a considerable degree of assurance on the part of the physician to enable him to invade the sacred precincts of the cranial cavity. Get the anatomy and physiology of the parts well in hand and then do your best to save the life of the patient.

Malignant Growths Treated with Acetic Acid by the Cataphoric Action of the Galvanic current.

W. M. MASON, M. D., Lodi, Cal.

The following report of a case may be of value in directing study to a method of using drugs, at present but little practiced:

Something over a year ago a young lady, twenty-two years of age, consulted me in regard to a growth in the left breast. It was about one and one-quarter inches in circumference and about one and one-half inches below and to the left of the nipple. It was very hard and painful and sensitive, so much so that it had seriously interfered with the use of her left arm and hand for more than two years. She noticed the growth about three years before and had been treated for more than a year with alteratives and non-caustic local applications by her family physician in Iowa. At first the treatment seemed to be of benefit, but it proved to be only very temporary. He and others, as well as myself, ad-

vised immediate surgical interference, but this she refused to consider for a moment. I tried an alterative treatment, but without the least benefit, and I was forced to seek some other line of treatment. Having made considerable use of galvanism in the removal of morbid growths and had also made some study of the cataphoric action of drugs. I began a series of experiments to determine the treatment most likely to succeed in this case. A remedy to be used in this way must be carried or forced deep into the tissues without becoming disorganized by the electrolytic action of the poles, or the resulting elements must be so carried and they be able to do the required work, and at the same time whichever takes place the skin must not be seriously injured. These conditions I found nicely fulfilled by chemically pure acetic acid. The pos-

itive pole forced it deep into the tissues without being decomposed and cauterizing the skin; and its power to destroy cell growth with which it comes in contact is well known.

My method of application was to take a heavy copper wire, wrapped with absorbent cotton in such a way as to make an active surface of about half an inch in diameter and saturate with pure acetic acid for the positive electrode and it placed as closely as possible in contact with the growth. For the negative pole use any electrode with a large surface, applied as near as possible in such a way that the tumor will be in the direct line of the current. I could generally use two applications a week, using forty to eighty milliamperes from five to ten

minutes. When the skin became tender omitting a treatment occasionally prevented any trouble.

After six weeks the decrease in tenderness and pain was marked, and at the end of four months no trace of the trouble remained and none has appeared up to the present time.

Of course, it may not be permanent, but the same can be said even of the knife. If the lymphatics were involved or the general health much disturbed, I should not give much encouragement for this method; but in suspicious cases where the use of the knife would be questioned or where surgery was refused, I feel sure this treatment would be of service, or at least worthy of a trial, as it certainly will do no harm.

Therapeutic Miscellany. (No. 2.)

J. C. ANDREWS, M. D., Los Angeles, Cal.

There has been in this section of the State during the last year an epidemic of measles. But few cases have been severe, except where the patient, from exposure or imprudence, has taken cold, and in comparatively few instances have alarming sequelæ followed.

We usually find the symptoms of a severe coryza preceding an attack of measles, chill more or less marked, followed by high temperature, skin dry, hot and pungent, pulse 120, hurried

respiration, pain in the lungs, portraying trouble, which may lead us astray in our diagnosis, if we are not wide awake as occurred to me in the case of my own boy, aged eleven years, he having had the measles twice previous. Came home from school one evening, chilling, followed by high temperature, skin hot and dry, annoying cough, pain in the lungs. I diagnosed it pneumonia, as I never dreamed of measles. He was sick, somewhat flighty. Taking him in hand I prescribed as follows:

R Lloyd's tr. veratrum...10 drops
 Tr. bryonia.....10 drops
 Tr. jaborandi.....15 drops
 Water.....4 ounces
 M Sig. Teaspoonful every thirty minutes for six hours.

When it was near midnight he became quiet and dropped asleep. I covered him up well and laid down until morning. To my great surprise he was covered with measles. We had no further trouble with the case, simply continuing the treatment every hour or two, kept him in bed for a week, to avoid taking cold. If the cough is severe and persistent I give tr. drosera one drachm, water four ounces; teaspoonful every two to four hours until well.

Usually the treatment of measles is very simple, many times not requiring the services of a physician, the parents giving some warm diaphoretic infusion such as saffron, pennyroyal, spearmint, etc., keeping them warm and comfortable in bed, when in a few days all is well.

I regard rubeola one of the most dangerous of the exanthemata if the eruption recedes sooner than it should, as the sequelæ is almost sure to be lung trouble, severe catarrhal otorrhea, or some other chronic affection, often ending the life of the patient.

La grippe does not seem to lose its grip, as its presence continues to make itself known in various forms. I was recently summoned to a case of a lady, aged thirty-five years, married. Characteristic headache, severe muscular pain, high fever, temperature 105, with a very severe ulcerated throat,

painful deglutition; had been ill two days before I saw her. She had taken some tablets of hydrag. mite et soda for the bowels. Under the treatment I give in these cases, varying it to suit the case, in three days she was convalescent, which is as follows, and is specific: If I can see the patient during the first day of the attack can cure him in from twenty-four to thirty-six hours at the farthest. I gave ten grains of antikamnia to relieve the severe pain, followed with

R
 Lloyd's tr. veratrum....10 drops
 Tr. macrotys.....30 drops
 Tr. gelsemium.....20 drops
 Tr. jaborandi.....30 drops
 Tr. phytolacca.....20 drops
 Water.....4 ounces
 M. Sig. Teaspoonful every thirty minutes for two hours, then every hour when awake.

Gave one drachm of antibilious physic to cleanse the bowels. After twenty-four hours treatment, amendment was apparent and continued uninterrupted until convalescent.

Second case. Joe L—, a plumber, came home with a severe headache and muscular pain; thought he would break in two; high fever, temperature 104, pulse 110, full and bounding, lumber pain, sore throat, some ulceration. Prescribed as in the above case, except on second day gave three grain capsules sulphite of soda to correct bad taste from acid stomach, and in the morning of third day was up eating his breakfast with good relish, and dismissed him as a convalescent.

This is the way I treat la grippe, with uniformly good results. I have

not had a case with unpleasant sequelæ since pursuing this mode of treatment. We meet so many cases of chronic lung difficulties traced to improperly treated cases of la grippe. Gentlemen and readers of your enterprising JOURNAL, our treatment of disease by the "Eclectic specific" method rarely fails to get there.

I have a very successful treatment for that painful and very prevalent affection designated under the name of "Cankrum Oris," or commonly known as canker sore mouth. I learned it from Dr. J. W. Rue of Saticoy, Ventura county, Cal., some five years since. Here it is:

R

Sulphate of zinc.....1 to 3 grains
Water..2 to 6 ounces

M Sig. Rinse the mouth thoroughly several times a day.

It will cure the most inveterate case in a few days. Try it gentlemen and report.

Tr. epiphegus, 3x dilution, will cure headache arising from excitement from any cause—as from being out on the crowded street, in the whirl of excitement, over work, delayed meals, impaired digestion, nervousness: The physician can soon learn the indications so as to make no mistake. The dose is six drops every two or three hours, in a swallow of water, until relieved. Not unfrequently one dose will give entire relief; at most, the second will cure. I have found but two or three cases where it was of no benefit.

Abortion,—Its Cause, Prevention and Treatment.

M. E. VAN METER, M. D., San Francisco, Cal.

Mr. President and Fellows of this Society: In presenting this paper for your consideration, I am well aware that its title embraces a scope of the topic to be considered, far beyond the pale of a paper of this kind; yet I shall try to touch upon the important features in the different branches of the subject:

First, What is abortion? We are taught that the word abortion means the expulsion of the contents of a gravid uterus previous to the fourth month of pregnancy. But we will

have to bear in mind during the study of this important and interesting subject, that the same pathology that sounds the tocsin of war against the embryo, and later decrees and signs its death warrant, thus causing abortion, may, later on in gestation, prove just as fatal to the more mature foetus and cause a miscarriage or premature labor.

CAUSES—In speaking of the causes of abortion I shall not include cases of international abortion, neither shall I

include those cases when speaking of the prevention of this trouble. I think of several causes, of which the first named I consider the most frequent and most important, with the others following in their respective order, viz: Gonorrhœal endometritis, disease of the placenta, disease of the fetus, chronic endometritis, other than that produced by gonorrhœa; a specific or hereditary blood taint in the mother, a twisting or knotting of the cord and an auto-action of the womb itself.

It is now claimed by good authority that gonorrhœa is incurable and that a man who has once had the disease may, at any time however remote, and however long it may have been since he has been or felt any symptoms upon himself, infect his wife; hence there are many women suffering from this trouble, and aborting therefrom, when it has never once been suspected by their physician, their husbands or by themselves that there was a specific taint lurking within them; and they would denounce with horror such a suggestion. This being true, there is a much larger per cent of our women suffering from latent, or as one writer expresses it, "chronic gonorrhœa," than was ever dreamed of in the past. And no woman thus affected has a safe hold on the foetal life within her.

PLACENTAL CAUSES—As to placental causes of abortion, syphilis is, perhaps, the most common as well as the most sure. Here we have a cell proliferation, beginning in the villi, extending to the connective-tissue stroma and the epithelium to such an extent that

the blood vessels are compressed, and finally the life of the foetus is destroyed from lack of blood supply. Fatty degeneration and malignancy are other causes. Tuberculosis may also be the cause that is not generally recognized.

CAUSES FROM THE FŒTUS—Foetal death, from whatever cause, will, in all probability, cause abortion. There are authentic cases where death occurred as early as the fourth month, still the child was carried to full term. I saw such a case with our Professor Maclean; and also had a case in my own practice, where death occurred at the third month and the foetus was carried till the seventh month. But these are exceptions to the rule; for in a large majority of cases abortion will occur in a few days, or weeks at most, after death of the foetus takes place, regardless of what the cause of death may be, though cases occurring from traumatic or nerve shock are more likely to rapidly supervene than those that occur from some systemic defect in the mother or child.

CHRONIC ENDOMETRITIS—Chronic endometritis, by furnishing poor soil for the nurturing and nourishment of the embryonic cell will often defeat nature in her efforts at reproduction, though simple endometritis is not nearly so inimical to germ life as is specific endometritis. Of course it would be a difficult matter to say just to what extent a woman may suffer with endometritis before the life of the foetus is threatened. One woman might have but a slight inflammation and abort, while another might have a much more severe type and not abort.



BLOOD TAINT—Under this head may be classed those diseases that produce a constitutional weakening, namely, tuberculosis, scrofula, malignancy and syphilis, not directly affecting the placenta.

THE CORD—The cord is never a direct cause of abortion, but acts indirectly by causing the death of the foetus, which in turn produces the abortion. A twist, a knot, the passing of several loops around the neck, either of which may impede or wholly check the circulation, so necessary to the life of the child.

There is also a degenerate condition which I have observed in the cord that I am unable to say whether it was a cause or a result of the foetal death.

AUTO-ACTION OF THE WOMB—By auto-action of the womb I mean those cases where abortion is produced by a hyper-action of the physiological rythm of the uterine body, which is controlled by the sympathetic nerves from the ovarian and hypogastric plexuses, or from a deficient action of the cervical nerves, which are spinal and come principally from the third and fourth sacral. On this point Professor Robinson of Chicago, with whom I had the pleasure of spending a part of my time while studying in the East, says:

The uterus being supplied nearly entirely with sympathetic nerves, is a rythmical organ and always ready to expel its contents. Any one can prove that the pregnant uterus is in a state of constant rythm by placing the hand on the hypogastric region. I have seen Dr. Tait announce pregnancy in the early stages by simply noting the uterine rythm. The cervix being sup-

plied with spinal nerves, is not rythmical; hence it is sober and quiet—a moderator, a sentinel, a breakwater against which dash the troublous waves of uterine agitation. When the rythmical waves of the uterus become very violent and force the foetal ball with unnatural vigor against the quiet neck, the latter yields and dilitation takes place, allowing the uterine contents to escape.

The more I study the subject the more thoroughly do I agree with Professor Robinson. We can now the more easily understand how and why mental emotions, excessive venery, high temperature, uterine misplacements, violent exercise, heavy jars or jolts and many other causes, some seemingly trivial, produce abortion—one by increasing the action of the sympathetic to the uterine body; another by diminishing the action of the spinal nerves to the cervix. It is claimed that continued friction of the nipples, or simply rubbing the abdomen, will cause an abortion, showing conclusively that it is done through the sympathetic system.

PREVENTION—In considering the prevention of abortion we will have to bear in mind the diversity of causes, both remote and direct, and also the peculiar pathology in each case; for we can all readily perceive how utterly useless, and even harmful, it would be to stimulate the sympathetic nerve to greater vigor if the rythmical action were already too strong and were pounding away, as it were, against the door which the cervical nerves were struggling to hold closed. Likewise would it be wrong to give a quieting medicine when from some long con-

tinued fever or exhausting disease the nerves supplying and controlling the cervix were already yielding to the rhythmical force within.

I said, when naming the various causes of abortion, that I considered gonorrhœa as the most frequent and the most important, which I now re-iterate, but qualify with the statement that I consider gonorrhœa as the most common of any cause, inherent in itself. Auto-action is, no doubt, the cause of a greater number of abortions than any other one cause; but being itself dependent upon numerous other causes or conditions I have placed it last in consideration.

In cases of criminal abortion, or those coming from a severe traumatism affecting, directly, the uterus or foetus, or cases where the cord is twisted, knotted or passes several times around the neck, I have nothing in the way of a preventive to offer.

If a woman habitually abort from gonorrhœal or chronic endometritis, the only prevention is the removal of the existing pathology, and the surest way, in my mind, to accomplish this, especially if gonorrhœal, is the thorough use of the curette, followed by frequent antiseptic flushings. Of course, this can only be done between pregnancies.

If a woman who is pregnant calls on us for the first time, stating she has had several miscarriages, and by close questioning we are led to suspect a syphilitic taint, we are justified in placing her upon an anti-syphilitic treatment, cautiously administered, with the hope that we will prevent

those pathological changes in the placenta which are so inimical to the foetus. If we see the patient before she becomes pregnant and begin the treatment, we will have a greater assurance of accomplishing our object. For scrofula, tuberculosis or other constitutional dyscrasy, we will be called up to give appropriate remedies, which are more likely to be remedies that will act on the spinal nerves and increase their action, thus protecting the cervix from undue relaxation, rather than remedies that would quiet the sympathetic system, thus controlling the uterine rhythm, as under these conditions it is not likely to act too strongly.

We now come to consider the cases of auto-action, or what would perhaps better be termed auto-reflex-action. I use the term auto-action to express a condition in which there is abnormal action of the uterus, within itself, and in which there is no known structural pathology. But in many of those cases we may discern a reflex factor; hence I think the term auto-reflex-action would cover all of the ground better.

In this class of cases we must study well the condition with which we have to deal, otherwise we will be like a lost child trying to get home and all the time traveling in the wrong direction—the more we do for our patient the worse off will she be.

If the case be one from whose history we are led to believe we are dealing with an exalted action of the sympathetic nervous system, then medicines that will quiet and soothe are

indicated; and I would rely upon opium, gelseminum, lobelia, chloral and the bromides. Any anti-spasmodic will be in line, but I like those named. But if we have a condition from which we suspect abortion, and that condition is dependent upon nerve prostration, general debility, from whatever cause, or paraparesis, then will we want to give a spinal nerve stimulant. Strychnia, with other tonics, will take the lead.

In those cases where there is a reflex factor predominating, as in excessive venery, or from rectal irritation from drastic cathartics, dysentery, etc., we must first remove the cause and then if necessary assist nature in removing the effect.

TREATMENT—This all important feature of this subject can be dismissed with but few words. I think there is but one rational, scientific treatment for these conditions, and that is to promptly and thoroughly clean out the uterus, with antiseptic precautions, and to thoroughly wash out the uterine cavity with an antiseptic solution, of which bichloride of mercury is king. I condemn emphatically and unqualifiedly the dilly-dally method of tamponing and waiting. I consider it the make-shift of timidity or ignorance. By it the woman is allowed to suffer as many hours as it is necessary to suffer minutes. She is not only allowed to suffer the pains incident to a miscarriage—and surely they are bad enough—but she is made to suffer from the inconvenience of the tampon, if she is packed sufficiently to prevent hemorrhage—the only possible excuse

for a tampon. I have seen cases that could not pass a drop of water while the tampon remained. The use of tampons also exposes the patient to infection, the thing of all things to be most dreaded in these cases. I have removed a tampon twelve hours after its introduction, and there would be such a horrible odor that it would have to be immediately removed from the room. As long as a tampon remains, just so long there will be an oozing, if not an actual hemorrhage; and just so long as there is a discharge at all everything about the patient is kept filthy.

When I am called to a case I immediately set to work to clear the uterine cavity. If the dilatation is not sufficient to allow the introduction of forceps and curette, I rapidly dilate and remove every vestige of the foetal envelopes that I can. I then turn in a hot bichloride solution and keep up the stream till all flowing has ceased and the water returns clear. I then dry off the patient, put a clean napkin to her and put her back in bed, clean, comfortable, well. How different from the temporizing method of suffering, fifth and infectious danger.

The aborting woman is like a person with a toothache. If the tooth can be saved it should not be sacrificed; but when we find that it has to come out, we say the sooner the better, and we would all look upon a man or woman as foolish or chicken-hearted who would walk the floor all night and suffer rather than have a little additional pain and have it all over in a few minutes. By my method of treat-

ment I have never lost a patient, have never failed to have them express gratitude that it was so soon over and never had one dissatisfied or call another physician.

I admit that when I have to dilate the womb I cause a little pain, but it is nothing by comparison to the long hours of hard, bearing-down pains which she must suffer if left for nature to dilate the cervix and expel the uterine contents.

I seldom have to curette the second time, though I have had to do so the third time. I have never had a patient object to the second or even the

third operation, which is proof positive that the first treatment was not unduly severe. As to the necessity of a second curettement, I am guided by one, or more, of three conditions, viz: Pain, odor or the passing of bright red blood. If any one of these conditions exist, I consider the demand imperative for using the curette the second time, and would feel that my work was but half done and that I would be very derelict in my duty and a coward if I did not fight the battle out and stand by my patient till she was out of danger.

Biographical Sketch of the Late Dr. H. B. Piper.

ALEXANDER WILDER, M. D., Newark, New Jersey.

The death of Dr. H. B. Piper removes another of our able and better men from the present scenes of active life. The Eclectic School of Medicine thus loses one who strengthened it, who adorned it and who gave it tone and character. He was skillful as a physician, active as a citizen, obliging as a neighbor, rigidly just as an administrator of affairs, exemplary as a church member and affectionate as a friend, a husband and a father.

Henry Beam Piper was born in the Ligonier Valley, Westmoreland county, Pennsylvania, October 15, 1831. He was of Saxon descent. His ancestor was Maquas Pyper of Holstein. In the wars which prevailed in Germany the

Pipers emigrated from Nuremberg to the north of Ireland and thence to Dockmouth in Devonshire. There Nathaniel Piper was born in 1658, and coming to America after he had grown to manhood he settled at Ipswich, Massachusetts. Three of his family afterward made their homes in Lancaster county, Pennsylvania. They gained distinction both for their personal character and for bravery in the Indian wars. William Piper served under General Forbes at Fort Duquesne in 1758 and also in the Revolutionary war. His son, Peter Piper, crossed the Alleghanies at the age of eighteen to make his home in the Ligonier Valley, where he died in 1858

at the age of ninety-seven. He was an Indian scout and spy, a man of great courage and daring, familiar with woodcraft as well as warcraft. He was a Jacksonian Democrat in politics, a Cumberland Presbyterian in religion and a veritable patriarch—the father of twelve children. His sons and grandsons inherit his beliefs; but his son William, the father of the doctor, became a staunch Republican after the repeal of the Missouri compromise.

Henry was reared at the family homestead and received his education in the common school, supplemented by several terms in Somerest and Sewickley academies. He learned his father's trade of millwright, following it during the summer and teaching school in winter. It was his purpose, however, to become a physician, and he began the study of medicine with Dr. Fundenburg of Somerest. His preferences, however, were with the reformed school, which had been introduced into Western Pennsylvania by Drs. L. Oldshire and Henry Yeagley. Accordingly in 1858 he entered the office of his cousin, the late Dr. Leman T. Beam of Johnstown, who perished in the flood of 1889. Here he pursued the usual course of reading, when the Civil War breaking out he hastened to volunteer in the Federal army. He enlisted in the Pennsylvania Eleventh, "Dick Coulter's regiment," first for three months, then for three years and again for three years. He participated in many of the hardest fought battles—Falling Waters, Cedar Mountain, Second Bull Run, Chantilly, South Mountain, Antietam, Fredericksburg,

Gettysburg, Spottsylvania, Cold Harbor, Chickamauga, Rappahannock—twenty-one in all. At Antietam he was severely wounded in the right arm and at Gettysburg in the right shoulder. He was captured at the latter battle by General A. P. Hill's corps, but escaped in three days.

He had risen to the grade of Captain, but his wounds and diseases contracted in the swamps of Virginia compelled him to accept a discharge November 22, 1864. He resumed the study of medicine with Dr. Beam, matriculating in the Philadelphia University of Medicine and Surgery in the spring session of 1865 and graduating in 1866. Among his fellow students were Drs. H. K. Stratford, now of Chicago; Harrison A. Tucker, John R. Borland of Franklin, Penn.; Ray V. Pierce of Buffalo; James M. Louther, C. E. Heaton.

He engaged in regular practice at Harrison City, removing to Greensburg six years later. In 1876 he transferred his residence to Tyrone, where he continued till his death. He was twice elected to the Legislature, in 1873 and 1874, and his political career is described graphically by the Greensburg Argus:

He served when brains and honesty were necessary qualifications for public office; and to his infinite credit be it said: "He never betrayed a trust, either public, private or professional."

His domestic life was almost without a ripple. He was married to Miss Mary E. Gay of Philadelphia in 1869. They had six children, and his death is the first breach in that family circle. The marriage was one of the happiest

on record. Each had the fullest regard and confidence of the other, and an unkind word never passed between them.

The Altoona Times describes him as "One of the most prominent, progressive and esteemed citizens of Tyrone. In politics a Democrat; he was a leading figure in the counsels of that party, both in the county and State, frequently serving as delegate to the county and State conventions. After his service in the Legislature he never again sought elective office except in the municipality, where he always took great interest in public affairs, and served as School Director. He was also Postmaster.

"Dr. Piper was emphatically a leader of men, and in whatever branch of activity he was found he was at all times looked up to as a wise counselor and a commanding figure. He held the rank of elder in the Presbyterian Church, and was prominent in Masonic circles. He also took special pride in his membership in the Loyal Legion, comprised of veteran commissioned officers of the war and their lineal descendants. He was also a member of Post 172 of the Grand Army of the Republic, and enjoyed the distinction of being the Surgeon-General of the Union Veteran Legion. We remember well when he went to Nashville to attend the National Eclectic Medical Association. After saluting several of the members, he remarked: 'I perceive that you have seen Hiram.'

"Dr. Piper was a man of noble impulses, tender-hearted as a child, generous to a fault and kind and charit-

able in an eminent degree. He was, indeed, the personification of honor, and his whole life was as pure and unblemished as it was possible for man to be. His home life especially was a model of domestic happiness, and his friendship was firm as adamant and true as virgin steel. From his very nature he was incapable of doing intentional injury to his fellow man, and he scorned to do a dishonorable or discreditable act."

In the Eclectic School of medicine he ranked high. He was diligent in the maintaining of organizations for its advancement, and served repeatedly as President of the societies, the Central Eclectic Medical Association of Pennsylvania, the State Association, and in 1885 of the National Eclectic Medical Association. He was an excellent executive officer, diligent to redress injustice and careful to maintain whatever was in accord with his conviction. In 1879, when kicking Eclectics of Pennsylvania contemplated withdrawing from the National Association because of what they considered the arbitrary disposition in command, he soothed and restrained them. In 1884, when Dr. R. S. Gunn was accused, he sat on the committee and prepared the report showing that no rule of the association had been violated. Dr. A. J. Howe was also acquitted at the same time. The next year, believing Dr. J. M. Hale to have been unjustly treated, he favored the undoing of the action, and in 1886 Dr. Hale was reinstated. Dr. Piper always regarded the proceedings in the case of Dr. Gunn as a conspiracy dic-

tated by malice and ill-will by the enemies of the association.

The plot of the Old School to have a Medical Examining Board in every State, which was set on foot twenty years ago, he always steadily opposed. The medical bills used to read just alike, emanating as they all did from one source and having but one purpose—the crushing of other schools of practice. His address as President of the National Eclectic Medical Association was a scathing exposure of the purpose. He strenuously opposed with every legitimate effort the establishing of a medical board in Pennsylvania. The measure after many defeats finally became a law, each State society being authorized to appoint a board for its own school. Of course a triple board will never be regarded as a final adjustment. In New York the three work in an old school harness, and in California every session of the Legislature is noted for a new attempt to put the rival boards out of existence. It will so be till the spirit of liberty casts off its cerecloth.

Dr. B. L. Yeagley refused any part in the Examining Board. Dr. Piper accepted a place and continued to protect his brethren. At the last "deal," however, he was dropped off and another man appointed. He continued to the last, discharging every relation of a man and citizen. But his health for years had been precarious. He attended the meetings of the National Association steadily when he felt able, seldom speaking, but incessantly watchful and critical. The sixth article of the by-laws was prepared

and submitted by him in 1892. He contemplated attending the meeting at Waukesha, believing a plot to be hatching to do a great wrong, but was unable. A letter written by him distinctly gives his views. On the 21st of June he appeared languid, but there was no manifestation of a final event. The next morning, however, he arose and sat by the window for breath. He became suddenly ill and was assisted to bed. He was able to give suggestions to those around him, but all efforts were unavailing and a little before 6 o'clock life had departed.

The event was everywhere a shock. Dr. C. M. Ewing first apprised the writer of the event. The words of David to his attendants were again verified: "A prince and a great man this day lies prostrate." The funeral was celebrated without ostentation. Rev. D. Furbay of the First Presbyterian Church officiated, after which the Masonic rites were performed. As a soldier brave, as a citizen diligent, as a physician faithful, as a neighbor assiduous, as a friend devoted; in his family he was a priest, a chief, a father and protector. He was one whom no cause which he advocated could afford to lose.

We have at hand the sixth annual report of the Pasteur Institute, an institution for the study and treatment of hydrophobia and other bacterial diseases, 1, 3, 5 and 7, West Ninety-seventh street. During 1895 some 167 persons received the Pasteur preventive treatment against rabies, with a record of but two deaths.

Medical Societies.

Last Words of the Transportation Committee.

Pitts Edwin Howes, M. D., Boston, Mass.

The good news still continues to arrive and the success of our transcontinental trip is assured.

The Souvenir Books have been mailed, though a little later than was expected; all reports concerning them are of the most flattering nature.

This year's meeting of our association will be one long remembered; it will mark an important epoch in our history.

Reports from various stopping places along the route indicate that we shall be met with ovations seldom accorded to visiting delegations.

At Helena the physicians and citizens of the place are making extensive preparations to give us a most cordial reception and extend generous hospitalities. At Tacoma we are to be met by the welcoming delegation of the Western Eclectics and are assured that the greeting will be all that could be desired. At Seattle the city authorities are arranging for a civic reception which will be most gratifying to all those who are so fortunate as to participate. At Portland much enthusiasm is being manifested and the courtesies which are to be extended will cause many happy recollections in the future.

All physicians are most earnestly asked to contribute their mite toward making this the grandest demonstration of the Eclectic School of Medicine that this country has ever witnessed.

If you ever contemplate making the tour across our magnificent country this is an opportunity of a life time; it should not be allowed to pass unimproved.

All should remember that brief visits are to be made at the most interesting places, going and returning; that train and time tables are so arranged as to permit the most beautiful scenery to be enjoyed during daylight; that we travel by a special train and with a party of congenial spirits, thus relieving the trip of much of its tediousness; that we are to be the recipients of a warm-hearted, whole-souled hospitality, which will add immeasurably to the pleasure anticipated.

Our Western brethren beyond the Rockies will be out in large numbers, and it is due to their untiring efforts that the East should respond by a delegation commensurate with the Eclectics residing in her domain.

Let every Eclectic east of the Rocky mountains carefully weigh and consider this proposition: What do I owe to the school of medicine that has made me what I am; that has furnished me with the weapons to successfully combat disease; that is so distinctively and uncompromisingly American?

If this question is thoroughly pondered, the physicians who congregate at the various starting points will in-

deed produce a party of which American Eclecticism may justly be proud.

We Need Your Help.

H. B. Mehrmann, M. D., Oakland, Cal.

To those who have not the interests of our school at heart it may perhaps appear superfluous to again urge the Eclectic physicians of the Pacific Coast to rally for the coming National at Portland. It is, however, for the especial benefit of this kind that I must keep on "whooping" them up in my humble fashion. The lagging ones are the people to whom this paper is particularly directed, since those who feel interested, as all good Eclectics should, need no coaxing. Those who possess the requisite amount of love for their school of medicine and who are not ashamed to stand up and fight for their cause, are not in need of any reminder. They realize that it is necessary to make our National Association a complete success in order to advance our cause. A word to them is sufficient.

We will find this class of Eclectics well represented not only at our session in Portland, but also at all sessions in the future, no matter where they be held. To those of you, then, who are wavering and undecided I make this appeal. We need each and every one of you to succeed in our endeavor. Your earnest and hearty co-operation is most respectfully solicited. Without your fullest consideration and assistance our work can be but half accomplished. The officers of the National, as well as those of our State

society, feel the same anxiety for the welfare of our meeting in June as does every conscientious practitioner experience for his patient lying dangerously ill. As every one of you has felt the responsibility of your position, it will not require much imagination to inform you just how much these officers feel the responsibility of their task. I can assure you that it requires more than ordinary effort to carry an undertaking of this kind to a successful issue alone and unaided. Many hands make light work and many busy bees can soon fill a hive with sweet and delicious honey; therefore let us emulate the bee and by our labors and earnest co-operation make an appearance that will give our cause a lasting impetus on its march to prosperity.

And now a word to our Alumni of the California Medical College. There is not one of you who has not come to the realization of the deep interest taken in your welfare, both in and out of college, by our revered professors. These men have labored long and hard for your benefit, and in doing for us what they have felt was their duty they have more than occasionally sacrificed both business and comforts. For all this they have cherished a parental hope that we would not only prove successful as practitioners, but also that we would stand by them at such a time when an opportunity presented itself for us to retaliate as best we could for all the considerations they have shown us. The time has arrived when we can bring feelings of satisfaction and joy to the hearts of these gray-haired tutors by simply

showing the metal we are made of at the session of the National. They will be at Portland to a man, and it will be the proudest moment of their lives to say to the sages from the East, these, all these are our children, born to the medical profession by our good Eclectic mother of the West, the California Medical College.

Proud of us? Yes. It will do your heart good to see them. Every silvery thread upon their heads will stand forth with especial brilliancy as they speak those words. Not one of them but would fight to the knife for his professional children. Of this we have ample proof at hand. Now, then, can we as Alumni of the California Medical College stand calmly by and see these whole-souled benefactors feel chagrined at the lack of attendance on our part? Certainly not.

Of the hundred strong composing our part there should be at least a majority of them graduates of the California Medical College. We have often felt happy at the opportunity to show off the learned men who instilled the breath of a professional life into us, and now that we know that the tables are turned and they are anxious to exhibit us for approval to those holding similar positions in the East, we should make it our duty to be there and to make a creditable appearance. We are still young and active and the loss to us during a short absence from our offices can soon be gained. If any of you are inclined to think that your business is so pressing that you cannot leave your practice for a sufficient length of time to attend, just disabuse

your minds of such a thought. Don't flatter yourselves quite so much. The world will roll just as evenly when you are dead and gone as with you on this earth. Furthermore, at the end of life's run you will have no more to show for your labors if you have emured yourselves and never have mingled with your fellow practitioners as when you have the consciousness of having enjoyed life as you went along. Hence let it be your resolve to be on hand. We intend to make the trip to Portland and return, suit the convenience and pleasure of every one as near as such a thing is possible. My circular letter mailed to every Eclectic in the State will give you full knowledge of what is expected of you and what you are to do to insure your comfort and pleasure for our ten days trip for business and enjoyment. Pay strict attention to instructions and follow them closely as well as promptly, remembering that not one of you can afford to be left at home nor be missed from the family circle at our northern destination. In conclusion, and in this my last appeal to you through the columns of Our Journal, let me impress upon your minds these words:

WE NEED YOU ABSOLUTELY IN OUR BUSINESS.

Alameda County Eclectics.

Oakland, Cal., April 28, 1896.

The regular session of the Alameda County Eclectic Medical Association was held at the office of Dr. Fearn, 1163 Clay street, at 8 P. M. In the absence of the President and Vice President at the beginning of the

meeting, Dr. G. H. Derrick was appointed to fill the chair pro tem.

Roll call showed a good attendance. Those present were Drs. Campbell, Church, G. H. Derrick, V. A. Derrick, Fearn Sr., Fearn Jr., Kylberg, Mehrmann, Sharp, Stark, Van Kirk and Van Meter.

Minutes of the previous meeting were read and approved.

The Secretary then read a paper the subject of which was "The Etiology of Tuberculosis." A lengthy discussion was provoked which was both interesting and profitable, nearly all the members participating.

Dr. Mehrmann then gave a partial report of the rates to be obtained on the trip to Portland.

The next meeting was appointed to be held at the residence of Dr. J. T. Farrar, 1922 Virginia street, Berkeley.

Meeting then adjourned.

Oakland, Cal., May 12, 1896.

The Alameda County Eclectic physicians met in regular session at 8 P. M. at the residence of Dr. Farrar, 1922 Virginia street, Berkeley. Dr. Fearn, President of the association, presided. The attendance was good, and after roll call and reading the minutes, Dr. Farrar presented an interesting clinic. The patient was an elderly lady who had a hard pulsating tumor of the throat, a little to the right of the median line. It had been developed for about twenty years and had been diagnosed both as goitre and as aneurism of the right common carotid. Most of the fellows, however, upon examination concurred in the

opinion that the tumor was of the fibroid variety.

Dr. H. Kylberg then favored the members with a well written and interesting paper upon a timely subject, namely, "Sea Sickness." The paper elicited much discussion. Dr. Church thought that disturbed visual reflexes was a factor in the etiology; also disturbances of the center for equilibrium. Dr. Stark recommended cocaine, the horizontal position, strong nervines such as celery, etc. Dr. Mehrmann said "if you wish to avoid sea sickness, be natural." Bromo-seltzer is a remedy which he would recommend for trial. Dr. Farrar mentioned the treatment of lowering the head and sleeping with a low pillow or none. Dr. Gladding would have the voyager stay on the land side of the vessel, avoid fluids in the stomach, take a light diet and then if sick would give $\frac{1}{8}$ gr. doses of cocaine in sherry wine. Dr. Fearn recommended nux and brandy. Dr. Church thought the combination of neutralizing cordial and fluid ext. guarana p. æq. to be a remedy of some merit. Thus many remedies were given and whether or not there be medicinal virtue in them may perhaps be demonstrated to some of the fellows in the near future.

Dr. Fearn was appointed to prepare a paper for the next meeting.

It was then announced that Mrs. Farrar had something to offer for the good of the society and the company was ushered into the dining-room where the table was daintily arranged with the good things of life. The sandwiches and cake were very appetizing and the chocolate was simply delicious. After doing ample justice to this part of the programme the association was favored with music, and after some time spent in mirth and song the meeting adjourned.

V. A. Derrick, Secretary.

Alumni and Personal.

DR. DORA M. HAMILTON, Editor

Communications for this department should be addressed to its Editor, 1422 Folsom Street, S. F.

Dear Alumni: We have another class added to our ranks and welcome them right gladly. There were thirty bright men and women of whom we expect to be proud. They are glad to bid a last farewell to the old C. M. C. and are anxious to "locate." We all know that it will only be a few months when they will wish they were still under the motherly wing of the old college. It is a good safe place.

We think the committee are to be congratulated on having conceived a unique plan for the graduating exercises. We heard many expressions of pleasure that the management had evaded the beaten track. Drs. Dietz, Kuykendall and Ormsby are to be congratulated on the success of the evening's entertainment. The programme was as follows:

Prayer.....REV. H. L. DIETZ, D. D.

Opening Address.....

.....PROF. W. B. CHURCH, M. D.

Address and Conferring of degrees

by the President.....

.....PROF. D. MACLEAN, M. D.

Valedictory.....J. M. O'BYRNE, M. D.

Closing address.....

.....PROF. J. W. HAMILTON, M. D.

Benediction.....REV. H. L. DIETZ, D. D.

OPENING ADDRESS, PROFESSOR W. B. CHURCH,
OAKLAND, CAL.

It seems reasonable to presume that some of you may have mistaken me for

an old man. Appearances do, perhaps, favor such a suspicion to such an extent that I may be allowed to indulge the privilege of the old to counsel the young. It often happens that this is the only privilege they have left, so they may be expected to cherish it and possibly exercise it too freely. If it does old people good and doesn't hurt the young, at least no harm comes of it. Without really conceding the fact that I am old, I believe I have reached a point where I can anticipate the feelings and disposition of an old man. If I mistake not it is one of his strongest desires to give the young man the benefit of his experience. This operates in a measure to remedy a well-known defect in the laws of heredity on account of which acquired faculty and knowledge are not to any great extent transmitted to one's offspring. Realizing as the old man does, therefore, that the only chance to preserve to the world the useful knowledge which has resulted from his life-long experience is by direct counsel and advice, he is instant in season and out with efforts to impart it directly to those coming after him. If this counsel was always heeded and followed, man would indeed soon become as gods knowing good from evil. Nature has provided against too rapid progress, however, by implanting in the breasts of the young an indisposition to take experience second hand.

You know how it was with the girl when her mother advised her never to marry because she had tried it and had seen the folly of it.

"But mother, I want to see the

folly of it, too."

Seriously though, I would be only too happy if any word or thought of mine could be of service to any of you in any way.

It must be by this time evident that I have no little pride in you as a class. I do not hesitate to say that every member of the faculty will join me in according you unusual proficiency. We all feel that in natural ability and special acquirements you are better prepared than the average graduate to enter upon the duties and assume the responsibilities of the profession of medicine. We think, indeed, that you have penetrated so far into the realm of knowledge necessary to a physician that you have some adequate conception of its extent, and consequently are imbued with a feeling of becoming modesty. It is a matter of every day observation that overweening confidence is usually in inverse ratio to knowledge. The boaster in medicine does not commend himself to men of sense. On the contrary, the habit betrays his shallowness.

In the nature of things your ideas and anticipations at the present time are a little extravagant. The teaching of all your professors has been presented with a degree of positiveness that your future experience will hardly justify. To this there is, indeed, a single exception, which modesty forbids one to name.

You will do well to regard the equipment your Alma Mater has furnished as barely sufficient to enable you to profit by the lessons of experience. It is no reproach to you, and

not altogether a disadvantage to have an excess of confidence at the outset of your career. On account of it you will not hesitate to tackle cases which old practitioners have given up as hopeless, and occasionally your courage will inspire courage, and your fresh zeal will overcome difficulties and you will cure cases which have been too easily given up. It is true, nevertheless, that your attention during your college course has been directed to the maladies and morbid conditions which can be relieved rather than to such as are intractable and irremediable. You are liable to run against a surprising number of the latter kind in the years immediately before you. Sooner or later you will be sadly aware of the impotence of all your resources in the presence of some of the graver forms of disease.

Be prepared, therefore, for a degree of disillusion, but avoid the opposite extreme of medical skepticism. Try to preserve a calm, judicial temper that will prevent you from confounding natural sequences with drug effects. Hasty conclusions have led many astray in medicine.

You have heard me say before tonight that accurate knowledge of the phenomena of health is necessary to one who attempts to interpret the phenomena of disease. It is equally true that you must be familiar with the various stages in the natural evolution of any disease before you can estimate properly the effect of therapeutics. The knowledge of mankind is simply the accumulated experiences of the race. In nothing is this fact better exempli-

fied than in medicine. Not a single fact has been evolved from the inner consciousness of any body, or supernaturally revealed in any way. The old rule for administering a drug because it has been found useful in such cases is sometimes sneered at, but it is the foundation of all that is valuable, even in specific medication. Experience, however, will only confirm your delusions if you misinterpret its facts.

Knowledge and qualifications of a high order are required to observe intelligently and interpret correctly the phenomena attending the course and progress of disease. You must also possess the judgment and discretion to decide when, how and to what extent to interpose.

The life you are entering upon presents no attractions for the lazy or half-hearted man. Anything approaching success can only be attained by constant, life-long study and investigation, sustained by enthusiastic love for the work. At the best there are only degrees of success, but the degrees in the upper scale are full of satisfaction. In no case at the bedside will you have exclusive possession of the field; there will always be other factors in each problem beside your efforts and your therapeutic agents, and in some cases these other factors may be the most important ones, and your chief duty may consist in not antagonizing them by meddlesome interference. In many cases your chief satisfaction may consist in the consciousness that you have done no harm. Happy indeed will you be if you are always permitted

this much consolation. A far higher and nobler aim, however, is to make sure that you have neglected nothing essential to the preservation of any life entrusted to your care. This is, therefore, the important hour of your life—the point to which your best efforts and most cherished hopes have been tending.

You now have before you the opportunity to test the value of the knowledge you have gained by the only test worth considering, namely, the extent to which it enables you to benefit mankind; to increase the sum total of human happiness. Judged by this standard, what knowledge is of greater value than that possessed by the skilled physician? His life is constantly devoted to warding off the ills and assuaging the pains of others. He enjoys to greater degree than any other the consciousness of going about doing good. Important as your mission is on this plane however, you should not be content with it. You are members now of a noble and learned profession that may be expected to confer dignity and honor. It exacts from you, however, corresponding obligations. We have a right to expect you to be a force and influence for right living and for progress. At the least you must see to it that your daily life and personal character are above reproach. Command in this way, as you easily can, the respect of the community with which your lot may be cast.

Mingled with many opportunities to do good, there will come to you temptations to do evil. You will be even

importuned to do murder, and that the most unprovoked and cold blooded. Will you consent? Do you propose to imbrue your hands in innocent blood? If so, be sure your sin will find you out; the brand of Cain will be on you forever. Do not flatter yourself that pre-natal murder is in any way different in its nature from murder in general. Whoever is guilty of this crime is unfit to be trusted in any way; above all, unfit to be trusted with the life of his fellow man. I hasten to say that as I look in your faces to-night I find in none of them any warrant or indication that any one of you will degenerate into a foul abortionist. I picture something altogether different. As I forecast the future for you I see you developing such upright and noble lives, bearing on your faces such proof of moral elevation and virtue that few will dare approach you with such a proposition, and none presume to do it a second time.

Having been so long associated and so pleasantly, the faculty of the California Medical College are naturally interested in you and solicitous for your future success and prosperity. We cherish high hopes and expectations for you that you will not only be eminent in the profession but also exemplars and exponents of all that is best in American citizenship and public and private morality.

The chief distinction that man enjoys is in being endowed with the privilege and power to choose. It rests with each of us to show that we are entitled to such a privilege,

to justify the confidence thus reposed in us by making a wise choice in all contingencies where two or more courses are open to us. In attempting to sum up all my good wishes for you in a single sentence, it is that you may have the wisdom and courage to choose rightly in all matters where principle is involved.

You may not all become great doctors, but you may each aspire to the title of the good doctor. A title quite sufficient to fill the measure of reasonable ambition and sure to carry with it the love, respect and approval of all good men.

At the conclusion of Professor Church's remarks, Professor Maclean briefly addressed the class and awarded diplomas as follows:

- OLIVE F. ACTON, Omaha, Nebraska.
- LEN A. ALVEY, Oakland, Cal.
- R. A. BUCHANAN, San Francisco, Cal.
- WINNIFRED M. BYRNE, San Francisco, Cal.
- G. LANE COATES, El Paso, Texas.
- WINSTON D. COATES, A. B., El Paso, Texas.
- A. N. COUTURE, M. D., San Francisco, Cal.
- LUCY A. CRACKBON, San Francisco, Cal.
- HENRY L. DIETZ, JR., New Haven, Conn.
- M. MANLY ENOS, Oakland, Cal.
- CHARLES E. FEARN, London, England.
- A. M. FIELD, Tulare, Cal.
- F. N. FOLSOM, Marysville, Cal.
- P. L. HAMILTON, Marysville, Cal.
- J. M. HICKS, San Francisco, Cal.
- CHARLES K. HOLSMAN, Des Moines, Iowa.
- ANTOINETTE J. HUTCHINGS, Fresno, Cal.
- LAURA E. KELLY, A. M., Carson City, Nev.
- J. ARTHUR KUYKENDALL, Portland, Oregon.

FRANK T. LAMB, San Francisco, Cal.
 LOTTIE A. LAMB, San Francisco, Cal.
 W. M. LINQUIST, Tacoma, Wash.
 E. H. MERCER, A. B., San Francisco, Cal.
 J. M. O'BYRNE, A. B., San Francisco, Cal.
 ELON A. ORMSBY, Oakland, Cal.
 BELLE PEERY, Tehachapi, Cal.
 G. A. J. SCHEUER, San Francisco, Cal.
 FRANK THOMAS, San Francisco, Cal.
 DIO LEWIS TISDALE, M. D., Alameda, Cal.
 ELIZABETH WHITE, Australia.

After the exercises at the college the class adjourned to the I. O. O. F. Hall, Market and Seventh streets, where they received the congratulations of their friends. There was conversation, music by the orchestra, speaking, singing by a male quartet, refreshments, the evening concluding with a grand march and waltz.

Class of '96, may you be as successful practitioners as you have been successful students, is the wish of your Alumni editor.

Dr. and Mrs. Janes of 719 McAllister street, were guests of the class of '96, accompanied by their friend Dr. Byron E. Miller, a very successful surgeon of Portland, Oregon. Dr. Miller assures us that the National is bound to be a success.

Dr. Musgrave of Hanford was visiting the Alma Mater and congratulating the "fledglings" at the reception. The doctor was in the city in attendance at K. of P. Grand Lodge meeting.

We were surprised and delighted to meet Dr. Charles A. Burleigh of Forest Hill at the reception. The doctor

said he had to shake old friends by the hand and fly, as he was attending the K. of P. Grand Lodge.

Dr. L. M. E. Raymond writes: "Give the hand of sympathy and congratulation to the present class for me." The doctor is contemplating an Eastern trip in the interest of the Lake View Hotel, the health resort at Elsinore, in which she is interested.

A. F. Brockman, M. D., Bickleton, Wash., sends the following: "The Journal grows better and brighter as it grows older and I would feel lost without it. I think every Eclectic on the coast should do all they could to build up Our Journal. Will try to be with you in Portland." Thanks doctor; we hope all Eclectics will come to feel as you do with regard to the Journal.

Rev. A. J. Compton, M. D., Inglewood, writes: "Neither wife nor I are now in practice, but wish to help on the cause. If you could have a Southern California Eclectic Society would join it. 'Frisco is too far away for us 'poor folks.'" Thank you, doctor, for the kindness of yourself and wife. We wish more doctors who are in active practice would take your interest in the cause.

G. K. Osborn, M. D., has located at Weaverville, Trinity county, where he is associated with Dr. S. L. Blake.

We understand that Professor G. G. Gere is to be congratulated on the advent of a son at his home. Professor says he does not know whether "congratulation or commiseration" is most in order.

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Expression is essential to growth. We cordially invite all Eclectic physicians who would keep abreast with the times to make frequent use of our columns.

To insure accuracy, employ the typewriter when possible. Otherwise prepare manuscript with care, re-writing when necessary; be kindly thoughtful of the Editor and compositor, and do your own drudgery—time is money.

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*Editorial.*Going? Going?

Who is going to Portland on the 12th? Every Eclectic who desires the success of his school should use every effort to be present at the meeting of the National Association. If a thing is worth doing, it is worth doing well. If it is worth being an Eclectic it is worth being sincere in our professions. To show our sincerity it is incumbent that we sustain our local, State and National Associations. Lip service is cheap, but actual presence is what counts.

The National meeting is held in Portland for the benefit of the Eclectics of the Pacific Coast. Let us show our appreciation of the courtesy by

taking advantage of the opportunity of meeting with the ablest men in the medical profession. Some may feel that they cannot afford to go, but such cannot much less afford to stay at home. The relaxation from daily routine afforded by the trip over the grandest mountain ranges and richest valleys in the world, more than compensates for the absence from business; but mingling with the savants of the East and gathering the choicest gems of medical literature is a pleasure not to be missed at any price.

In these days of combines and trusts individualism is at a disadvantage. Combination gives strength, co-operation wins success, where single handedness would fail. Duty calls to every Eclectic physician to attend the National meeting of his school; to counsel in its deliberations and guide its destiny upward and onward, and still onward till knowledge is supreme. Friends, we shall shake hands with you at Portland. Maclean.

The Man With a Grievance.

In managing Our Journal it is quite impossible to please everybody. The best that can be done is to treat all alike, and each as handsomely as circumstances permit.

The editor is always willing to loan a dollar to a friend; but it would be quite useless for Tom, Dick and Harry to seek to borrow money from Our Journal. In its management sentiment cuts no figure. It asks no favors nor grants any favors. No proposition is at all considered that is not labeled "business."

Our Journal is run in the interest of our coast Eclectics. Its pages, to their fullest capacity, are, first, for the use of Eclectic physicians that live anywhere between Alaska and Patagonia; and second, for all those that live anywhere between Boston and Honolulu. Our only rule is "pot luck for all."

It is gratifying to note that contributions are gradually increasing in number and excellence. But as papers come in, whether from an old timer or a new writer, they are all put in the hopper together and the crank begins to turn; when they appear in print it is without preference, and each in as good form as our facilities will permit.

There is no salaried editor nor proof reader; all proof reading is done on the run and in moments stolen from time that should be devoted to private business. Hence, in the very nature and essence of things, this work cannot be done in the highest style known to the art.

When possible, proof sheets are submitted to contributors, but this cannot often be done. In the present number, for instance, we have a paper from Boston, from New Jersey, from Oregon, from Los Angeles and from a dozen other points between these places. Now, as the typesetting has to be done in about two weeks before going to the mail bags, to suppose that with our limited supply of type we could send to each author proof sheets of his paper, and await his convenience for returning them to us, is to suppose an absurdity. Our printers are paid for working not for waiting, hence they wait for nobody and for nothing.

As a rule, contributors are kind and thoughtful. Sometimes one considers his grievance wholly unbearable and refuses to write any more. We are always sorry to have this happen. It is better for the doctor, who would be considered alive, to appear often in print. When it does unavoidably happen we do not, as a rule, hang crape on the handle of the big front door, but pursue the even tenor of our way, finding abundant consolation in that very expressive and newest slang phrase, "There are others."

We trust that all will understand that no studied slight nor injustice is ever permitted in Our Journal, and that when they have a seeming grievance they will kindly consider both sides of the case, and "be to our faults a little blind, but to our virtues very kind."

The Souvenir Book.

Our copy of the Souvenir Book of the National is at hand, and a most creditable affair it is. It is a work of which all Eclectics may well be proud. The half tones are high art, the selections of scenery are made with judgment and the reading matter is clear and to the point.

To bring one of these books from Portland as a reminder of the great National meeting of Eclectics on the Pacific Coast in 1896 will be to obtain a prize that will be cherished while life lasts.

It's now or never, doctor; do not let any ordinary sacrifice keep you away.

Our Frontispiece.

The portrait of the late Dr. Henry B. Piper that adorns our first page, together with a biographical sketch written by Dr. Alexander Wilder, were originally prepared for the Eclectic Health Journal, published by Dr. H. A. Hasbrouck of Salt Lake City.

Unfortunately the plant of the Eclectic Health Journal was recently destroyed by fire, and the Journal will not be again issued until fall. Dr. Hasbrouck kindly offered the sketch and cut to Our Journal, a courtesy we are sure our readers will all highly appreciate.

The Second Pan-American Medical Congress.

The committee on organization of the Second Pan-American Medical Congress has elected Dr. Manuel Carmona y Valle, President; Dr. Rafael Lavista, Vice President, and Dr. Eduardo Liceaga, Secretary, and has announced November 16, 17, 18 and 19, 1896, as the date of the meeting to be held in the City of Mexico.

The most cordial invitation is extended to the medical profession of the United States to attend and participate in the meeting.

Those who contemplate attending should send their names and addresses at as early a date as possible to Dr. Charles A. L. Reed, St. Leger Place, Cincinnati, that the committee in Mexico may be advised of the probable attendance.

William Pepper, ex-officio President; A. M. Owen, A. Vander Veer, Charles

A. L. Reed, ex-officio Secretary, International Executive Committee for the United States.

Information Regarding the Trip to Portland.

Arrangements have been made with the Southern Pacific Company whereby delegates and attendants residing at California points can obtain special rates and accommodations, namely:

A special round trip rate to Portland of \$18 35 will be available at San Francisco, Oakland Pier, Sacramento and Davis.

For those residing at points other than those named, certificates will be furnished which will enable the holders to obtain the usual one fare and a third for the round trip to San Francisco, Oakland Pier, Sacramento or Davis, as the case may be.

Prize Essay.

The William F. Jenks memorial prize, the fourth triennial prize of \$400, under the deed of trust of Mrs. William F. Jenks, will be awarded to the author of the best essay on "The Etiology and Pathology of Diseases of the Endometrium, including the Septic Inflammations of the Puerperium." The prize is open for competition to the whole world, but the essay must be the production of a single person. Papers must be submitted before January 1, 1898, to the College of Physicians of Philadelphia, northeast corner of Thirteenth and Locust streets.

Jenner Centennial.

The 100th anniversary of Dr. Edward Jenner's great discovery was celebrated with becoming pomp and ceremony by the Medical Society of Pennsylvania, on May 22d, at the celebrated vaccine farms of Dr. T. M. Alexander & Co., Marrietta, Pennsylvania.

Dr. Charles A. L. Reed of Cincinnati has been selected by the European Committee on Organization of the International Periodical Congress of Gynecology and Obstetrics as honorary President of the meeting of that body to be held in the city of Geneva, Switzerland, the first week in September of this year.

Very Complimentary.

We clip the following from The Journal of Benton county, Oregon, which we think will interest the many friends of Dr. R. O. Loggan. The doctor is one of the prominent men of Benton county:

R. O. Loggan, candidate for Representative of Benton county, was born in Polk county, Iowa, in 1854. He moved with his parents to Cass county, Nebraska, in 1866, and to Kansas in 1870. He is a graduate of Lane University, Leocompton, Kansas, where he completed the four years' scientific course. Soon after his graduation there, which occurred in 1881, he went to Cincinnati and took a course in the Eclectical Medical Institute, graduating from that institution in 1886. After practicing in Kansas for a short time he came to Philomath in 1889, where he continued the practice of his profession with success. As a student

we knew him to be first class; as a man he is possessed of sterling integrity that gives him the confidence of all; as a Representative he will constantly and regard the wishes and interests of his constituents.

Obituary.

KING—In Chico, Butte county, California, May 5, 1896, William King. M. D., aged 80 years.

He was born in Chardon, Ohio, in 1816. Dr. King was one of the oldest representatives of the Eclectic School of Medicine, having graduated from the Worthington, Ohio, Medical College in 1840; from the Cincinnati, Ohio, Eclectic College, in 1850, and also took a post-graduate diploma from the Bennett Medical College in Chicago in 1869.

He practiced many years in Ohio and Illinois, coming to California in 1870. He formally held offices of trust and was highly esteemed by all who knew him.

For nine years prior to his death he filled the position of Health Officer for his town and vicinity.

Fluid Pepsin.

Physicians will find great satisfaction in prescribing the Fluid Pepsin, manufactured by C. E. Worden & Co., San Francisco. We think it the best in the market. Bear in mind their "Cito" pills, and Rhamnus California. Literature on application. See ad.

Publisher's Notes.

California Fig Syrup.

The proprietors of this popular medicine have for many years past published in the leading medical journals a full and candid statement that the laxative principles of its preparation were obtained from senna, and that fig juice used is merely to promote its pleasant taste.

By prompt, active and judicious management the business has grown to be of great value. For some reason the courts are not inclined to give the firm full protection in the use of the name of their medicine. However, its popularity is so great that the demand will doubtless remain large even though numerous imitations should make their appearance.

Course in Electro-Therapeutics.

The National College of Electro-Therapeutics, 168 Bellefontaine street, Indianapolis, Ind., May 1, 1896.

Dear Doctor: We desire to announce to the medical profession that the National College of Electro-Therapeutics is now thoroughly organized and ready to receive students. Each branch of Electro-Physics, Electro-Physiology and Electro-Therapeutics will be thoroughly taught. Students may enter at the beginning of every second month.

Private personal courses and mail courses of instruction will be given to those desiring it.

Special Notice—To all who order our Mail Course of Instruction during

the month of June we will accept \$5 per month for four months in payment. This offer will not be made again.

Fraternally and very truly yours,
The National College of Electro-Therapeutics.

Wm. F. Howe, M. D., President.

Injunction.

On February 26, 1896, an injunction was issued by the Circuit Court of the United States in behalf of the Drevet Manufacturing Company of New York, producers of Charles Marchand's preparations of Glycozone and Peroxide of Hydrogen, against Dr. B. P. Beach of Seville, Ohio.

The defendant had put on the market a preparation of his own, labeling it "Glycozone," thus violating the law of copyright and getting himself into serious trouble—a warning to those who would profit by the illegitimate use of the energy and brains of others.

The New Underwear.

This is the best time of the year to adopt the Deimel Linen-Mesh Underwear. For health, comfort and real enjoyment there is nothing like it. Write for catalogue.

Aletris Cordial.

W. A. Ward, M. D., New Edinburg, Ark., says: "I have used Aletris Cordial in threatened miscarriage, in several instances, with the best results; one case in particular, the lady was of nervous temperament and very easily excited, but by giving Celerina com-

bined with Aletris Cordial for a short time, she passed over it safely. I am of the opinion that any physician prescribing Aletris Cordial, in such cases as it is indicated, will not be disappointed in the result."

Treatment of Epilepsy.

Since Brown-Sequard formulated his celebrated mixture of the bromides, these have everywhere been regarded as the "sheet anchor" in the treatment of epilepsy, and whatever progress has been made has only been in the line of additions to these efficient remedies.

Neurosine is an elegant preparation of the usual bromides, together with bromide of zinc and the pure and reliable extracts of cannabis indica, henbane and belladonna. Since Trousseau announced the great efficiency of belladonna in the Petit Mal it has held high rank as an admirable addition to the bromides. Of cannabis indica and henbane it is well said: "In morbid states of the system it has been found to cause sleep, to allay spasm, to compose nervous disquietude and to relieve pain. In this respect it resembles opium, but it differs from that narcotic in not diminishing the appetite, checking the secretions or constipating the bowels." (U. S. Disp., p. 351.) It is only reliable when properly prepared from a pure specimen of which Neurosine is composed.

Cycling and the Saddle.

Bicycles have taken the country and the world by storm and are fast coming into universal use. That they

have accomplished no end of good none will dispute; that they have brought with them certain evils, though not perhaps understood by people in general, is distinctly recognized by the medical profession. This does not result from any defect necessarily inherent in the bicycle, but from faults in its construction, particularly in the saddle employed.

As the writer referred to aptly expresses it: "A perfect saddle for either man or woman is one that will maintain the body in an easy and proper position. It must be a surface large enough to receive the tuberosities so that the weight come on the gluteal muscles. It should have, like an army saddle, a hole in the center, to relieve any injurious pressure. This will prevent urethritis, prostatitis, prostatic abscess and costitis. The saddle should allow pedaling without needless friction. The rider should have a firm, yet elastic seat."

In the Christy Saddle Messrs A. G. Spaulding & Bros. have secured a bicycle saddle that fully meets all the demands and satisfies at once all medical and scientific requirements without losing any possible advantage in other directions.

It is molded in strict anatomical conformity to the parts of the body with which it come in contact; comfortable yet firm cushions are employed and so adjusted as to properly receive the bony prominences of the pelvis. These cushions, which are removable, rest upon a perforated base and, with a free circulation of air through the horn of the saddle, insure

a cool seat, a most important consideration from the standpoint of comfort as well as hygiene. The frame is made of metal and maintains its correct position under all circumstances. The saddle is easily adjusted at the proper angle. Numerous testimonials from eminent surgeons declare this saddle to meet all the medical requirements, while eminent riders give it the highest praise.

Introductory Offer.

The introductory offer of the Hall Capsule Company of Cincinnati, Ohio, is worthy of investigation by the physicians who have never used the Anderson Vaginal Capsules in their practice. It will apply also to the Ruby Capsules if ordered in not less than 1000 at \$1 per 1000. Also the Pil Palmettine in bottles of 100 at \$1 per bottle, providing any physician prefers either of these specialties rather than the Vaginal Capsules. The Medical Dictionary offered by them could not be purchased for less than 50 cents in any bookstore, and it is an opportunity to obtain a standard book of reference without expense and should be taken advantage of at once.

Office Supplies.

Doctor, if you will write to N. W. Mallery, Crocker Building, San Francisco, he can assist you in procuring anything you may need to enable you to do good work.

Chronic Inflammation of the Urethra, Complicated by Old Stricture.

Arthur Aulad, M. D., M. B., B. Ch., B. A. O., B. A., Rathmines, Defoe Road,

Tooting, London, S. W., England, says: "I have very great pleasure in testifying to the extreme efficacy of Sanmetto. The only case in which I have used it was what I would call a test case, namely, one of inflammation of the urethra of long standing, complicated by old stricture. I gave it in drachm doses three times a day, and in four days the patient was completely relieved."

Tissue Remedies.

We make the best Schussler Tissue Remedies made. The "Waterhouse" Pat. Triturator has no equal in doing the work. Every pound is triturated by power four hours. Price, single oz. 15 cents; in pound boxes, 75 cents; set of twelve remedies, \$1 20; in tablets, 2 gr., \$2 lb.

European Indorsements.

The London Lancet of March 28, 1896, says editorially: Antikamnia is well spoken of as an analgesic and antipyretic in the treatment of neuralgia, rheumatism, etc. It is not disagreeable to take, and may be had either in powder or tablet form, the latter being made in 5-grain size. It is described as not a preventive of, but rather as affording relief to, existing pain. By the presence in it of the amine group it appears to exert a stimulating rather than a depressing action on the nerve centers and the system generally. If this be so, it possesses advantages over other coal tar products.

The concise indorsement of the Edinburg Medical Journal, which ap-

peared in the January issue, is equally interesting: This is one of the many coal tar products which have lately been introduced into medicine in Scotland. In doses of three to ten grains, Antikamnia appears to act as a speedy and effective antipyretic and analgesic.

Book Notes.

ELECTRICITY IN ELECTROTHERAPEUTICS. By Edwin J. Houston, Ph. D., and A. E. Kennelly, D. Sc. The W. J. Johnston Company, publishers, 253 Broadway street, New York.

This little work on the physics of Electro-Therapeutics, couched in simple language, will be of great service to those not especially trained in electro-technics.

BORDERLAND STUDIES. Miscellaneous addresses and essays pertaining to medicine and the medical profession and their relations to general science and thought. By George M. Gould, A. M., M. D. P. Blakiston, Son & Co., publishers, 1012 Walnut street, Philadelphia.

Some of the topics discussed are vivisection: Is medicine a science? The Etiology, Diagnosis, and Treatment of the Prevalent Epidemic of Quakery; Specialism; The Power of the Will in Disease; Human Life Under Denied Sensation, etc. These essays prove interesting and profitable reading.

A COMPEND OF GYNÆCOLOGY. By William H. Wells, M. D., Adjunct Professor of Obstetrics and Diseases of Infancy in the Philadelphia Polyclinic. 150 Illustrations.

A COMPEND OF DISEASES OF CHILDREN. By M. P. Hatfield, A. M., M. D., Professor of Diseases of Children, N. W. U. Medical School. 2d edition, revised. P. Blakiston, Son & Co., publishers, Philadelphia.

These compends are especially adapted for the use of medical students, being constantly revised and kept up to date.

ETIDORHPA.

When Henry Irving was in Cincinnati he purchased a copy of "Etidorhpa." A few days after his arrival in Chicago he telegraphed an order to Robert Clarke & Co. for four additional copies. Professor Lloyd inscribed his name in a complimentary copy and in return received the following letter:

My Dear Sir—Let me thank you most heartily for sending me the special copy of your wonderful book, "Etidorhpa," which I shall ever value. I may say that when by chance I found it in Cincinnati I read it with the greatest interest and pleasure and was so struck by it that I have sent copies to several friends of mine here and at home. I hope I may have the pleasure of meeting you some day either here or in London. I remain sincerely yours,
Henry Irving.

March 20, 1896.

In reply to a request as to whether the above letter could be made public, the following telegram was received:

My Dear Mr. Lloyd—By all means

use my letter any way you wish if of the least service. I hope to meet you at the first opportunity.

Henry Irving.

The price of this wonderful book is \$2, furnished by Cur Journal.

ARTISTIC CATALOGUE Portrait catalogue of books on medicine, dentistry, pharmacy, chemistry, microscopy, hygiene, nursing and allied subjects, being descriptions of nearly 300 standard works. Alphabetically arranged by authors' names, with an elaborate subject index, and with directions for obtaining books on approval subject to return if not wanted. P. Blakiston, Son & Co., 1012 Walnut street, Philadelphia.

URETHRAL DISEASES.

The well known Rio Chemical Co. of St. Louis has issued a very artistic and remarkably valuable pamphlet on Urethral Diseases.

The firm have long been in business, and have had correspondence with thousands of physicians from all parts of the world and have secured a fund of practical testimony that is of great value to all who are ever called upon to treat disease of the urethra. Free to physicians on application. Address Rio Chemical Co., St. Louis, Mo.

NOTES.

The Audiphone, and how to use it in hearing through the teeth, by Richard S. Rhodes. Full of interest to the

deaf and those interested in their welfare. Rhodes & McClure, Chicago.

The Pathfinder, an eloquent address by James T. Jelks, M. D., delivered to the graduated class of the Barnes Medical College, St. Louis, March 17, 1896.

Appendicitis, by John B. Deaver, M. D., with a large number of illustrations, including forty-four handsomely colored lithographs. A full, complete and practical guide in the management of this important disease. P. Blakiston, Son & Co., Philadelphia.

SHE.

A misty mass of lace and such
Ethereal things you dare not touch;
A crown of wavy, filmy hair,
(One strand of which you'd like to wear
Upon your coat); two dancing eyes,
Whose glance your love-lorn look defies;
A nose that has a saucy air,
And mouth—"Why, kiss me if you dare!"
That's she,
And this is

HE.

A conscious clump of tailor clothes;
A longish head; a Roman nose;
Chameleon eyes of blue and green
And gray—eyes seldom seen;
A mouth that talks a steady stream
In reverie or idle dream,
But scarce can utter or express
One single thought if but her dress
Touch but his foot as she goes by.
Blushing, I pause—you wonder why?
Why, he is I and I am he.
And you, my darling—you are she!
—From Demorest's Magazine for January.

"Man," says Carlyle, "is everywhere a born enemy of lies."

ASEPSIN SOAP



MEDICINAL USES OF ASEPSIN SOAP.

FOR THE SKIN.—The antiseptic qualities of Asepsin and Borate of Sodium make this soap desirable for the preservation of the dermal tissues, and to remove and prevent cutaneous blemishes. It is valuable for roughness of the skin, acne, comedones, milium, blotches, excessive greasiness of skin, for softening and preventing roughness and chapping of the hands. It corrects abnormalities of the sebaceous glands, thereby regulating the lubrication of the skin, and is further useful to repair dermal tissues when they have been subjected to the deleterious action of chalks and cosmetic lotions.

CUTANEOUS DISEASES.—For the following skin affections it may be used freely with marked benefit: Acne vulgaris et rosacæ, seborrhoea, eczematous eruption, herpes, psoriasis, prurigo, syphilitic eruptions, dermatitis, ulcerations, pruritic conditions, parasitic diseases, as scabies, for the relief of rhus poisoning, and for the removal of pediculi. A clean skin is necessary in any course of medication, and Asepsin Soap is a rational cleanser.

IN SURGERY.—The surgeon will find it valuable for cleansing the patient as well as the operator's hands, sponges and instruments. For its cleansing and antiseptic effects it may be employed in wounds of all kinds, chilblains, bed sores, ulceration, pustules, and for removing offensive and irritating discharges, and as a foot wash.

IN GYNÆCOLOGY.—It is useful in irritating and offensive discharges concomitant to diseases of females, giving rise to pruritic and inflammatory conditions. Leucorrhoea, simple vaginitis and vulvitis, ulcerations and pruritus vulvæ, are conditions in which it is particularly indicated.

CONTAGIOUS DISEASES.—In the exanthemata it should be employed to hasten desquamation thereby shortening the period of contagiousness and hastening convalescence.

At the time I received the Asepsin Soap, I was suffering intensely from pruritus ani, and had already tried with scarcely even temporary relief, all—or nearly all—the standard remedies for this well-known ailment. I was well-nigh crazed with the intolerable itching, pricking, sticking, gnawing biting, burning pain. I had been nearly sleepless for several nights, and I was so busily engaged with my professional work all day long that it seemed to me that life was a burden, and I could get no rest at night. I frequently sprang from my bed, and ran wildly, crazily anywhere;—suicide would not be strange in anyone in such a condition.

Your Asepsin Soap I used without faith, but with astonishing and almost immediate relief and ease. I think I have never before recommended any special preparation, but nothing less than gratitude is due you for this benefit, and that gratitude I express most heartily now. I have delayed this letter many weeks, but I am still as thankful as ever, for my suffering was of a kind not to be forgotten.

PAUL T. BUTLER, M. D., Alamo, Michigan

ASEPSIN SOAP IS NOW READY FOR THE MARKET.

PRICE, \$1.40 PER DOZEN.

For toilet purposes, a cake of ordinary soap of this size is sold for 25 cents. In order to introduce it, on receipt of 40 cents in postage stamps, we will, for a time send one-fourth dozen cakes by mail to any physician who has not previously purchased it. Send for a quarter dozen, and you will never employ or recommend any other soap, either for toilet or medicinal purposes. Ask your druggist to keep it in stock. Address

LLOYD BROTHERS,
CINCINNATI, OHIO.

The Committee of Ways and Means



Is the most important one in Congress. The physician, when called upon to treat a case of Typhoid Fever, must resolve himself into a committee of one to devise "ways and means" to combat the disease. Nutrition is of vital moment.

Liquid Peptonoids possesses the following essential qualities AS A FOOD :

- 1st. Palatability.
- 2d. All the elements of nutrition.
- 3d. Pre-digested condition.
- 4th. Peptogenic potency.
- 5th. Slightly stimulating effect.
- 6th. Aseptic state.

Is it any wonder, therefore, that it is a favorite nutriment in Typhoid Fever?

Note:—If an efficient antiseptic remedy is desired **Liquid Peptonoids with Creosote** should be administered, thus furnishing at the same time both food and medicine.

